



Heart Disease, Cancer and Stroke Fact Sheet Amendments of 1965

Background:

Heart disease, cancer and stroke are the three leading causes of death in the United States. Taken together they accounted for 71% of all U. S. deaths in 1963, claiming more than 1.2 million lives. The economic cost of the three diseases amounts to many billions of dollars.

On March 1964 President Johnson appointed a 28-member Commission on Heart Disease, Cancer and Stroke. The Commission was asked to identify the obstacles to progress in controlling the three diseases and to recommend a national program to reduce their toll by applying existing knowledge more effectively and by accelerating the acquisition of new knowledge.

The Commission's Report, presented to the President in December 1964, outlined 35 major recommendations. The proposed Heart Disease, Cancer and Stroke Amendments of 1965 embody the principal innovative thrust of the Commission's program—the establishment of a network of regional medical complexes to make the best in diagnostic and treatment methods readily available to patients across the nation and to provide for coordinated development and use of manpower and facilities, region by region, for research and service related to heart disease, cancer and stroke.

Proposal:

The proposed amendments to the Public Health Service Act provide a new program of grants to encourage and assist in the establishment of regionally coordinated arrangements among medical schools, research institutions, hospitals and other health resources for research, training, and demonstrations of patient care in the fields of heart disease, cancer, stroke, and other major diseases.

Authorized Appropriations:

\$50 million for the fiscal year ending June 30, 1966, and such sums as may be necessary in the succeeding four fiscal years.

Eligible Applicants:

Public or nonprofit private universities, medical schools, research institutions, and other public or nonprofit private institutions and agencies.

Purposes for which funds may be used:

Two types of grants are proposed.

- A. Grants for planning and development of regional medical complexes comprising one or more medical centers, categorical research centers, and diagnostic and treatment stations.
- B. Grants for establishing and operating such complexes.

Funds appropriated may be used by the approved applicant for part or all of the costs of planning and operating such complexes, except that:

(a) Any grant with respect to construction of a facility or providing built-in equipment may not exceed 90% of the cost of such construction or equipment; and

(b) Funds may not be used to pay the cost of hospital, medical or other care of patients except to the extent that the cost is incident to research, training or demonstration activities.

National Advisory Council:

The proposed amendments would establish a new National Advisory Council on Medical Complexes to advise and assist the Surgeon General in preparing Regulations and to review all applications for grants and make recommendations as to approval.

The Surgeon General serves as Chairman of the Council, which will have 12 additional members who are leaders in the fundamental sciences, the medical sciences, or public affairs. At least one member must be an outstanding leader in heart disease, another in cancer, and another in stroke.